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CONFIRMATION NO. 1539

<b>SERIAL NUMBER</b> 10785,539	<b>FILING OR 371(c) DATE</b> 02/24/2004 <b>RULE</b>	<b>CLASS</b> 239	<b>GROUP ART UNIT</b> 3752	<b>ATTORNEY DOCKET NO.</b> 12781.105802CIP
<b>APPLICANTS</b> David Byron, Honeoye Falls, NY; Ronald M. Odessa, Batavia, NY;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/934,747 08/22/2001 PAT 6,695,228 which claims benefit of 60/226,831 08/22/2000 ✓ DWG 7/12/06				
<b>** FOREIGN APPLICATIONS *****</b> NONE DWG 7/12/06				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 05/14/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance met Verified and Acknowledged Examiner's Signature: <i>James J. Forman</i> Initials: <i>DW</i> 7/12/06		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 24 <b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 024902				
<b>TITLE</b> backflow Sprayer apparatus with backflow Valve				
<b>FILING FEE RECEIVED</b> 486	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	